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**APPLICANTS**

David Gerald Herbeck, Rochester, MN;  
 David E. Hubka, Rochester, MN;  
 Mark Donald Masbruch, Rochester, MN;  
 Mark Anthony Perkins, Hopkins, MN;  
 Joseph Harold Peterson, Kasson, MN;  
 DeVaughn Lawrence Rackham, Rochester, MN;  
 Richard Michael Smith, Oronoco, MN;

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

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Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 41	<b>INDEPENDENT CLAIMS</b> 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

**ADDRESS**

Grant A. Johnson  
 IBM Corporation, Dept. 917  
 3605 Highway 52 North  
 Rochester, MN55901-7829

**TITLE**

SELECTING A PROGRAM TO IMPROVE A SERVICE CLASS BY REQUESTING THE PROGRAM TO  
 INCREMENTALLY SELF-TUNE

<b>FILING FEE RECEIVED</b> 1212	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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